

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J		12/10/01
O.I.P.E. CLASSIFIER		4/3	12/11/01
FORMALITY REVIEW	L C	1024	12-31-01
RESPONSE FORMALITY REVIEW	M.D.	615	01-02-02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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REC-6-30183
 12/30/01
 451
 01/02/02

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